## **BABYSITTING RECEIPT**

| Date                     |          |  |
|--------------------------|----------|--|
| Client:                  |          |  |
| Dollar Amount Paid (\$): |          |  |
| Payment Method:          |          |  |
| Children(s) Name(s):     |          |  |
| Babysitter Name:         |          |  |
| Babysitter Address:      |          |  |
|                          |          |  |
|                          | Services |  |
| Services Provided:       |          |  |
| Service Dates From:      |          |  |
|                          |          |  |
|                          |          |  |
| Babysitter Signature:    |          |  |

